



2816

PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box → ☐

Approved for use through 10/31/02. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/408,114
Filing Date	September 29, 1999
First Named Inventor	HIRATA
Group Art Unit	2816
Examiner Name	Le, Dinh Thanh
Attorney Docket No.	53535.20022.00
Total Number Of Pages In This Submission	

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Charge Deposit Account	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declarations	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

RECEIVED  
SEP 10 2003  
TECHNOLOGY CENTER 2800

## SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

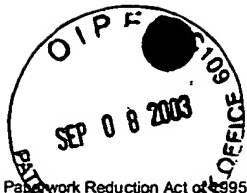
Firm or Individual Name	David T. Yang Morrison & Foerster LLP 555 West Fifth Street, Suite 3500 Los Angeles, CA 90013
Signature	
Date	September 3, 2003

## CERTIFICATE OF MAILING BY "FIRST CLASS MAIL"

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA, 22313, on September 3, 2003.

David T. Yang

Burden Hours Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2003 <small>Effective 01/01/2003, Patent fees are subject to annual revision.</small>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/408,114
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	September 29, 1999
42.00		First Named Inventor	HIRATA
		Examiner Name	Le, Dinh Thanh
		Art Unit	2816
		Attorney Docket No.	53535.20022.00
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Deposit Account		Large Entity Small Entity	
Deposit Account Number 03-1952		Fee Code Fee (\$)	
Deposit Account Name Morrison & Foerster LLP		Fee Description Fee Paid	
The Director is hereby authorized to: (check all that apply)		1051 130 2051 65 Surcharge - late filing fee or oath	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet.	
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application		1053 130 1053 130 Non-English specification	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1812 2,520 1812 2,520 For filing a request for <i>ex parte</i> reexamination	
FEE CALCULATION		1804 920* 1804 920* Requesting publication of SIR prior to Examiner action	
1. BASIC FILING FEE		1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action	
Large Entity Small Entity		1251 110 2251 55 Extension for reply within first month	
Fee Code Fee (\$)		1252 410 2252 205 Extension for reply within second month	
1001 750 2001 375 Utility filing fee		1253 930 2253 465 Extension for reply within third month	
1002 330 2002 165 Design filing fee		1254 1,450 2254 725 Extension for reply within fourth month	
1003 520 2003 260 Plant filing fee		1255 1,970 2255 985 Extension for reply within fifth month	
1004 750 2004 375 Reissue filing fee		1401 320 2401 160 Notice of Appeal	
1005 160 2005 80 Provisional filing fee		1402 320 2402 160 Filing a brief in support of an appeal	
SUBTOTAL (1) (\$)		1403 280 2403 140 Request for oral hearing	
0.00		1451 1,510 1451 1,510 Petition to institute a public use proceeding	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1452 110 2452 55 Petition to revive - unavoidable	
Total Claims 18 -20= 0 x 0 = 0		1453 1,300 2453 650 Petition to revive - unintentional	
Independent Claims 4 -3= 1 x 42.00 = 42.00		1501 1,300 2501 650 Utility issue fee (or reissue)	
Multiple Dependent		1502 470 2502 235 Design issue fee	
Large Entity Small Entity		1503 630 2503 315 Plant issue fee	
Fee Code Fee (\$)		1460 130 1460 130 Petitions to the Commissioner	
1202 18 2202 9 Claims in excess of 20		1807 50 1807 50 Processing fee under 37 CFR 1.17(q)	
1201 84 2201 42 Independent claims in excess of 3		1806 180 1806 180 Submission of Information Disclosure Stmt	
1203 280 2203 140 Multiple dependent claim, if not paid		8021 40 8021 40 Recording each patent assignment per property (times number of properties)	
1204 84 2204 42 ** Reissue independent claims over original patent		1809 750 2809 375 Filing a submission after final rejection (37 CFR 1.129(a))	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		1810 750 2810 375 For each additional invention to be examined (37CFR 1.129(b))	
SUBTOTAL (2) (\$)		1801 750 2801 375 Request for Continued Examination (RCE)	
42.00		1802 900 1802 900 Request for expedited examination of a design application	
**or number previously paid, if greater; For Reissues, see above		Other fee (specify)	
		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	
SUBMITTED BY		Complete (if applicable)	
Name (Print/Type) David T. Yang		Registration No. (Attorney/Agent) 44,415	
Signature		Telephone (213) 892-5587	
		Date September 3, 2003	